



Conviction Form

Please Print Information

Applicant's Name: Cynthia D M [REDACTED] Social Security Number: [REDACTED]

Daytime Phone #: [REDACTED] After Hours Phone #: [REDACTED]

Date of Birth: [REDACTED]

Date of Arrest: 10/01/1994 Date of Arrest: [REDACTED]

Charge 1: BURGLARY Charge 2: [REDACTED]

Location: NEWNAN GA Location: [REDACTED]
County State County State

Date of Conviction: 01/01/1995 Date of Conviction: [REDACTED]

Charge: BURGLARY - FIRST OFFENDER Charge: [REDACTED]

Sentence: 60 DAYS - FIRST OFFENDER Sentence: [REDACTED]

Time Served: 4 MNTHS- 11 DAYS Time Served: [REDACTED]

Dates on Probation or Parole: 05-25-1999 Dates on Probation or Parole: [REDACTED]

* Any other arrests or convictions?: Yes ☒ No

Any charges pending now? Yes ☒ No

Any other names used maiden, married, etc.

Please describe what happened:

Comments on Charge 1: CHARGED WITH BURGLARY, THEFT. SO LONG AGO, I DONT REMEBER HOW IT WAS WORDED- TIME SERVED IN WOMENS PROBATION DETENTION CENTER- CLAXTON GA. SERVED 4 MONTHS 11 DAYS ON 60 DAY SENTENCE. WAS ON PROBATION UNTIL MAY 25, 1999. FIRST AND LAST TIME I HAVE EVER BEEN ARRESTED. I WORKED WITH FULTON CO SHERIFFS RESERVE- THEN WORKED WITH UNDERCOVER NARCOTICS AND THIS HAPPENED TO ME- I HAVE SPENT TEN YEARS TRYING TO BETTER MY LIFE SINCE THEN.

Comments on Charge 2:

Signature of Applicant: _____ Date: ____/____/____

Recruiter Name: _____ Terminal: _____

REDACTED

STC256175.D0056



YOU ARE HEREBY NOTIFIED THAT THE INFORMATION YOU PROVIDE IN THIS APPLICATION MAY BE USED, AND YOUR PREVIOUS EMPLOYERS WILL BE CONTACTED, FOR THE PURPOSE OF INVESTIGATING YOUR SAFETY PERFORMANCE HISTORY INFORMATION AS REQUIRED BY PARAGRAPHS (d) AND (e) of § 391.23.

YOUR RIGHTS REGARDING CERTAIN INVESTIGATIVE INFORMATION

Pursuant to 49 C.F.R. § 391.23(l)(1), all drivers with DOT regulated employment during the preceding three years from the date of this application have the following rights regarding the investigative information that is provided to Swift as required by 49 C.F.R. § 391.23 (d) and (e).

1. The right to review information provided by previous employers;
 2. The right to have errors in the information corrected by the previous employer and for the previous employer to re-send the corrected information to the prospective employer; and
 3. The right to have a rebuttal statement attached to the alleged erroneous information, if the previous employer and the driver cannot agree on the accuracy of the information.
- The Federal Motor Carrier Safety Regulations ("FMCSR's") require Swift to obtain the following information on your application for employment:
1. The name(s) and addresse(s) of your employer(s) during the 10 years preceding the date of the application;
 2. The dates you were employed by that employer(s);
 3. The reason for leaving the employ of your previous employer(s);
 4. Whether you were subject to the FMCSR's while employed by your previous employer(s); and
 5. Whether your job was designated as a safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing requirements as set forth by 49 C.F.R. part 40.

Swift is also required by 49 C.F.R. § 391.23 (d) to investigate the following information from your previous employer(s) if you were employed to operate a commercial motor vehicle:

1. General driver identification and employment verification information;
2. The data elements as specified in 49 C.F.R. § 390.15 (b)(1) for accidents involving you that occurred in a three year period preceding the date of your employment application;
3. Any accidents defined by 49 C.F.R. § 390.15; and
4. Any accidents the previous employer may wish to provide that are retained pursuant to 49 C.F.R. § 390.15(b)(2) or pursuant to the employer's internal policy for retaining more detailed minor accident information.

Additionally, 49 C.F.R. § 391.23(e) provides that Swift must investigate the following information from all previous DOT regulated employers that employed you in a safety sensitive function that required alcohol and control substance testing specified in 49 C.F.R. part 40:

1. Whether within the previous 10 years you have violated the alcohol and control substances prohibitions under 49 C.F.R. § 382
2. Whether you failed to undertake or complete a rehabilitation program prescribed by a substance abuse professional; and
3. If you successfully completed a substance abuse professional's rehabilitation referral and remained in the employ of the referring employer, information on whether you had the following tested violations subsequent to the completion of the referral:
 - i. Alcohol tests with a result of 0.04 or higher alcohol concentration;
 - ii. Verified positive drug tests; and
 - iii. Refusals to be tested (including verified adulterated or substituted drug test results).

Swift must provide your previous employer with your written consent to release the information on paragraph (e). If you refuse to provide this written consent, Swift cannot permit you to operate a commercial motor vehicle.

SWIFT TRANSPORTATION CO., INC.

2700 S. 75TH AVE. PHOENIX, AZ 85043

EMPLOYMENT APPLICATION

QUALIFIED APPLICANTS ARE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, VETERAN STATUS OR DISABILITY
EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

Date of Application: 08/21/2008

Name: M. Cynthia D.

Social Security No. [REDACTED]

Present Address: [REDACTED]

Phone: [REDACTED]

Previous Address(es) during last 3 years (FMCSR 391.21 (3i)) [REDACTED]

Date of Birth: [REDACTED] (required by FMCSR 391.21 (2) to verify motor vehicle reports)

In case of emergency notify

PATSY G. [REDACTED]

Alternate Emergency Phone #

Name

Have you applied for work and/or worked for this company before?

Yes ☒ No ☐ When? [REDACTED]

If hired, can you present evidence of your U.S. Citizenship or proof of your legal right to live and work in this country?

Yes ☐ No ☐

Position which applying for: [REDACTED]

Are you able to perform the essential functions and duties of the job as contained in the job description with reasonable accommodation?

Yes ☐ No ☐

How did you find out about Swift?

Newspapers

Brochures & Postcards

Publications

Internet

Swift Transportation Employee

☒ Other: Outside Driving School

PLEASE READ CAREFULLY

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle?

Yes ☐ No ☒

B. Has any license, permit or privilege been suspended or revoked?

Yes ☐ No ☒

C. Have you ever been stopped while intoxicated?

Yes ☐ No ☒

D. Have you ever used any illegal drugs (including marijuana)?

Yes ☐ No ☒

If yes, when was the last time?

E. Have you ever been convicted for possession of, sale, or use of a narcotic drug, amphetamine, or a derivative thereof?

Yes ☐ No ☒

F. Have you ever been convicted of a criminal offense? In California, "criminal offense" excludes any conviction more than 2 years old for a marijuana-related offense. (A conviction will necessarily disqualify you from employment.)

☒ Yes ☐ No

G. Do you currently have any criminal actions pending in which you are a defendant? (A "yes" answer will not necessarily disqualify you from employment.)

Yes ☐ No ☒

H. Are you currently on probation or parole status? (A "yes" answer will not necessarily disqualify you from employment.)

Yes ☐ No ☒

I. 49 CFR 391.25(j) have you tested positive, or refused a test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in the last three years?

Yes ☐ No ☐

If yes to any of the above questions, state circumstances and dates

EDUCATION

Highest grade completed: 11

High School Graduate

Yes ☐ No ☐

College Graduate

Yes ☐ No ☐

Graduate-Seminal Graduate

Yes ☐ No ☐

List other specialty training or schools

MILITARY STATUS

Have you served in the U.S. Armed Forces?

Yes ☐ No ☒

Branch

Dates: From

To

11-001

Form 1

Revised 3/01/01

REDACTED

STC256175.D0058

Duties

EMPLOYMENT RECORD FOR PAST 10 YEARS

All applicants must list all full and part-time employment including military service, self employment, and periods of unemployment during preceding 10 years.
NOTE: List employers in reverse order starting with the most recent. Use an additional sheet if necessary.

From Mo Day Yr 09-04 To Mo Day Yr PRESENT
Phone # 770 471 3285
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr _____ To Mo Day Yr _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr _____ To Mo Day Yr _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr _____ To Mo Day Yr _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr _____ To Mo Day Yr _____
Phone # _____

CURRENT OR MOST RECENT EMPLOYERMay We Call? Yes ☐ No ☐

Name VFW POST 6330
Address 732 VETERANS PKWY JONESBORO, GA 30236
City State Zip Code
Position Held CASHIER- BARTENDER

Reason For Leaving TO BETTER MY CAREERA. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? Yes ☐ No ☐B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? Yes ☐ No ☐**SECOND PRIOR EMPLOYER**May We Call? Yes ☐ No ☐

Name _____
Address _____
City State Zip Code
Position Held _____

Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? Yes ☐ No ☐B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? Yes ☐ No ☐**THIRD PRIOR EMPLOYER**May We Call? Yes ☐ No ☐

Name _____
Address _____
City State Zip Code
Position Held _____

Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? Yes ☐ No ☐B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? Yes ☐ No ☐**FOURTH PRIOR EMPLOYER**May We Call? Yes ☐ No ☐

Name _____
Address _____
City State Zip Code
Position Held _____

Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? Yes ☐ No ☐B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? Yes ☐ No ☐**FIFTH PRIOR EMPLOYER**May We Call? Yes ☐ No ☐

Name _____
Address _____

STC256175.D0060

Supervisor _____
 Type of Equip. Driven _____

From Mo Day Yr To Mo Day Yr
 Phone # _____
 Supervisor _____
 Type of Equip. Driven _____

Position Held _____

Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed by this previous employer? Yes No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? Yes No

SIXTH PRIOR EMPLOYER

May We Call? Yes No

Name _____

Address _____

Position Held _____

Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSRs) while employed by this previous employer? Yes No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? Yes No

USE SEPARATE SHEET FOR ADDITIONAL EMPLOYMENT HISTORY

DRIVING EXPERIENCE				
CLASS OF EQUIPMENT	TYPE OF EQUIPMENT ¹ VAN-TANK-FLAT-ETC.	DATES		APPROX. NO. OF MILES TOTAL
		FROM	TO	
STRAIGHT TRUCK				0
TRACTOR AND SEMITRAILER	VAN	03/01/1980	09/01/2004	0
TRACTOR AND TWO TRAILERS				0
OTHER				0

LICENSE LIST ALL DRIVERS LICENSES HELD IN PAST FIVE YEARS (NOTE: A COPY of your valid drivers license or CDL must be attached for your application to be considered.)

STATE	LICENSE NUMBER	TYPE	ENDORSEMENTS	EXPIRATION DATE
GA	[REDACTED]			05/21/2014

MOVING TRAFFIC CONVICTIONS LIST FOR PAST FIVE (5) YEARS. IF NONE WRITE NONE.

DATE	LOCATION (STATE)	CHARGE	PENALTY
NONE			

ACCIDENT RECORD IF NONE WRITE NONE.
LIST ALL INVOLVEMENT WITH TRUCK AND CAR INCLUDING PROPERTY DAMAGE FOR PAST FIVE YEARS, INCLUDING PREVENTABLE AND NON-PREVENTABLE.

DATE	VEHICLE	NATURE OF ACCIDENT (HEAD ON, REAR END, ETC.)	INDICATE PREVENTABLE OR NON-PREVENTABLE	FATALITIES	INJURIES	AMOUNT OF PROPERTY DAMAGE
NONE						

STATES IN WHICH YOU HAVE OPERATED A CLASS-A MOTOR VEHICLE IN THE PAST FIVE YEARS

LIST ALL STATES:

REFERENCES (Please list 2 people able to verify your employment and personal history. Such as co-worker, neighbor, customer or an upstanding citizen of your community. Do not list relatives.)

1. Name	RICHARD C. [REDACTED]	DRIVER- AIR PRODUCTS	Relationship	STEP-FATHER
Address	[REDACTED]		Phone #	[REDACTED]
2. Name	LYNN W. [REDACTED]		Relationship	FRIEND
Address	[REDACTED]		Phone #	[REDACTED]

ACKNOWLEDGEMENT

I, [REDACTED], Transportation, Inc. (the Company) the right to investigate all references and to secure additional information about me, job related. I release from liability the Company and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information. A copy of this page serves as my authorization to seek/provide this information. I agree to sign all documents and consent forms which the Company deems necessary to verify the facts provided in this application. I give my consent and release from liability the Company and its representatives, its employees and any inquiries made about me as part of a reference check by any subsequent or potential employer.

I understand that the Company may find it necessary to conduct investigations. If it does, employees are expected to truthfully participate and cooperate in such investigations, including submission to background checks. Failure to do so may subject employees to disciplinary action, which may include termination of employment.

I understand that conditions of employment may be required to undergo a post-employment medical examination and voluntary stress screening test at the expense of and as prescribed by the Company and that any offer of employment is conditioned upon the successful completion of these tests. I agree to furnish such additional information and undergo any other examinations or tests to determine the company's right to demand my employment with the Company, if employed. These tests may include, but are not necessarily limited to random, for cause, reasonable suspicion or post-employment alcohol and substance abuse screening tests. Further, I release the Company, its agents or employees from any and all claims or actions arising out of such alcohol and substance abuse tests including, but not limited to, the testing procedures, the analysis and the disclosure of test results.

I understand that any offer of employment is contingent upon my ability to produce documentation verifying my identity and legal authorization to be employed, as required by the Immigration Reform and Control Act of 1986 (IRCA).

This application is active for sixty (60) days from the date it is completed, or until the specific position opening for which it was submitted is closed, whichever is earlier. Subsequent to the preceding business day reported, I will submit a new application to be considered for this, or any other position.

I hereby certify that any misrepresentation, misstatement, misreading, misquoting or limited information provided by me in this application will be sufficient cause for consideration of this application and/or revocation from the Company's service if employed. Further, I understand that such cause for denial to design as stipulated, for any reason, without prior written notice. The Company reserves the right to terminate

REDACTED

STC256175.D0062

my employment at any time, for any reason, with or without prior notice. I understand that no representative of the Company has the authority to make any verbal or written assurances to the contrary. I recognize the employment relationship to be an at will relationship and not for a specific period of time. This application represents the complete and final expression of the intent of the parties and may not be modified except by a writing duly executed by the undersigned and the President of the Company.

I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this or formal application. I further agree, in the event that I am offered employment by the company, as a condition to that employment, all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration in lieu of any Federal or State investigative, administrative or legal proceeding. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution and there are no other agreements as to dispute resolution, either oral or written.

I have read carefully the above information, understand and accept the contents thereof. This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature _____

Date _____

Customer: Swift Transportation Web
User: Patricia Ramos

VIEW REPORTS - SUBJECT LIST

We are pleased to announce that USIS Commercial Services, Inc. has changed its name to HireRight Solutions, Inc. While for a period of time you may find reference made in our materials to USIS Commercial Services, we are in the process of updating our web sites, software applications and documents to reflect this name change and expect to complete all updates in the near future. In the meantime, should you have any questions please contact us at: 800-322-9651 and select Option 3 for Customer Service.

Please Note: The information contained in this report is based on search criteria matching certain personal identifiers that indicate that this information matched the consumer who is the subject of the report. However, this information is not guaranteed for accuracy or truthfulness as it relates to the subject of this report. The information contained in this report was accurately copied from HireRight's supplier(s) of such information, including the public records of various courts and law enforcement agencies; credit bureaus; laboratories; etc., as applicable. However, information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of this report. Employment decisions should not be based solely upon information contained in this report. Positive ID requires a fingerprint search. The user of this report is responsible for following applicable local, state and federal laws with respect to the procurement and use of this information.

STC256175.D0064

This inquiry will also be searched against the Dept of the Treasury, Office of Foreign Asset Control, SDN and blocked persons list. You will be notified in the event of a possible match.

YOUR INQUIRY WAS CROSS-CHECKED AGAINST CSIS 20/70, WHICH IS A DATABASE OF OVER 256 MILLION CRIMINAL RECORDS. THERE WAS NO MATCH FOUND IN THIS DATABASE.

It is noted that the information contained in this report is based on search results identifying certain persons who are identified as the subject of this report. The information contained in this report was obtained from HHS records, including (a) the public records of various courts and law enforcement agencies; great (b) records of the FBI, including information on the subject of this report, as a result of identity theft, including evidence of fraud and identity, may be differently associated with the consumer who is the subject of this report. Information should not be based solely upon information contained in this report. Positive results require a fingerprint search. The use of this report is responsible for following applicable local, state and federal laws with respect to the protection and use of this information.

[illegible]

20/20 Insight Bundled

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STC256175.D0066

EXHIBIT 8



Conviction Form

Please Print Information

Applicant's Name: Victor W P [REDACTED] Social Security Number: [REDACTED]
 Daytime Phone #: [REDACTED] After Hours Phone #: [REDACTED]
 Date of Birth: [REDACTED]

Date of Arrest: _____ Charge 1: _____ Location: _____ <div style="text-align: center; margin-top: -10px;">County State</div>	Date of Arrest: _____ Charge 2: _____ Location: _____ <div style="text-align: center; margin-top: -10px;">County State</div>
Date of Conviction: _____ Charge: _____ Sentence: _____ Time Served: _____ Dates on Probation or Parole: _____	Date of Conviction: _____ Charge: _____ Sentence: _____ Time Served: _____ Dates on Probation or Parole: _____

* Any other arrests or convictions?: ☐ Yes ☐ No

Any charges pending now? ☐ Yes ☐ No

Any other names used maiden, married, etc. _____

Please describe what happened:

Comments on Charge 1:

Comments on Charge 2:

Signature of Applicant: _____ Date: _____
 Recruiter Name: _____ Terminal: _____

[REDACTED]

REDACTED

STC644074

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Customer: Swift Transportation Web
User: Beronice Ruiz

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We are pleased to announce that USIS Commercial Services, Inc. has changed its name to HireRight Solutions, Inc. While for a period of time you may find reference made in our materials to USIS Commercial Services, we are in the process of updating our web sites, software applications and documents to reflect this name change and expect to complete all updates in the near future. In the meantime, should you have any questions please contact us at: 800-322-9651 and select Option 3 for Customer Service.

Please Note: The information contained in this report is based on search criteria matching certain personal identifiers that indicate that this information matched the consumer who is the subject of the report. However, this information is not guaranteed for accuracy or truthfulness as it relates to the subject of this report. The information contained in this report was accurately copied from HireRight's supplier(s) of such information, including the public records of various courts and law enforcement agencies; credit bureaus; laboratories; etc., as applicable. However, information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of this report. Employment decisions should not be based solely upon information contained in this report. Positive ID requires a fingerprint search. The user of this report is responsible for following applicable local, state and federal laws with respect to the procurement and use of this information.

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STC644075

REDACTED

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Criminal Records, County

Customer: Swift Transportation Web (104308)
 Actor: Mary Johnson (5363Mary)
 Customer Reference: VERONICA BELL
 Customer Sub: 337

Reference: VERONICA BELL

Request Data:		Report ID:	1490307
Name:	P [REDACTED] VICTOR W	Request ID:	45717706
Jurisdiction:	GREENE, OH	Request Date:	08/30/2010
Search Type:	Misdemeanor	Completed Date:	08/31/2010
DOB:	[REDACTED]		
SSN:	[REDACTED]		
Race/Gender:	[REDACTED]		
Result Comments:			

No Record Found

Record check for requested search area only. National record status unknown. Positive ID requires fingerprint search. Employment evaluation should not be based on search results. Provider cannot act as the guarantor of the information accuracy or completeness. Appropriate use of the information contained in this report may be governed by both federal and state laws and it is the responsibility of the user to comply with all applicable laws.

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STC644076

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Criminal Records, County

Customer: Swift Transportation Web (204508)
 Actor: Mary Johnson (S362Mary)
 Customer Reference: VERONICA BELL
 Customer Sub: 337

Subject Name: Victor W P
 Subject DOB:
 Subject SSN:
 Subject Race:
 Subject Gender:
 Search Type: F
 Search State: OH
 Search County: GREENE
 Result Comments:

Report Number: 1498306
 Request ID: 45717783
 Request Date: 8/30/2010 8:13:50 AM
 Report Date: 8/31/2010 9:24:01 AM
 Reference: VERONICA BELL

CRIMINAL SEARCH RESULTS

Case Number:
 File Date: 7/11/2008
 Arrest Date:
 Offense Date:
 Agency Loc: GREENE COUNTY
 Agency Type: COMMON PLEAS COURT
 Case Comments:

Identifying Info	DOB: SID: FID: DL#: DL State: Gender: Race: Address: 	Matching Criteria <input checked="" type="checkbox"/> Last Name <input checked="" type="checkbox"/> First Name <input checked="" type="checkbox"/> Middle Name <input checked="" type="checkbox"/> DOB <input type="checkbox"/> SSN <input type="checkbox"/> Address
Name: VICTOR W P BirthPlace: SSN on Record: Height: Weight: Eye Color: Hair Color: Markings:		

Other:

Matched on: First Name, Middle Name, Last Name, and DOB
 Data inconsistent with the requested criteria.

Count: 1	Final Statute: 2913.02A1
Original Statute:	Final Charge: THEFT
Original Charge:	Final Type: Felony
Original Type:	Final Class: 4TH DEGREE
Original Class:	Plea Date:
Plea: Guilty	Final Degree:
Degree:	Disposition: GUILTY
OrigDisposition:	DispDate: 10/16/2008
OrigDispDate:	

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STC044077

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Comments:
Appeal Comments:

Type	Amount	Paid	Suspended
TOTAL AMOUNT IMPOSED	\$3934.63	\$770	

SentenceDate	Type	Active	Suspended	Completed
	PROBATION	3 Years;		

Record check for requested search area only. National record status unknown. Positive ID requires fingerprint search. Employment evaluation should not be based on search results. Provider cannot act as the guarantor of the information accuracy or completeness. Appropriate use of the information contained in this report may be governed by both federal and state laws and it is the responsibility of the user to comply with all applicable laws.

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Widescreen National Criminal Search

Customer: Swift Transportation Web (104508)
 Actor: Mary Johnson (5365Mary)
 Customer Reference: VERONICA BELL
 Customer Sub: 337

USIS COMMERCIAL SERVICES, INC
 WIDESCREEN PACKAGE PRODUCT HISTORY RECORD
 WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: P [REDACTED] VICTOR W
 DOB: [REDACTED] SSN: [REDACTED]
 TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
 SEARCH AREA: NATIONWIDE
 REQUEST DATE: 8/30/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: LASTNAME FIRSTNAME(VIC) BIRTHDATE
 NAME: P [REDACTED] VICTOR W

CRIMINAL RECORD INFORMATION

IN THE CASE OF POTENTIAL MATCHES
 IN THE WIDESCREEN DATABASE, RECORDS
 WILL BE ORDERED FROM THE ORIGINAL
 SOURCE TO VERIFY ACCURACY AND CURRENCY.
 FINAL RESULTS MAY OR MAY NOT RESULT IN
 A TRUE MATCH.

ORDER #: 76026279 REQUEST #: 131955060

USIS COMMERCIAL SERVICES, INC.
 WIDESCREEN PACKAGE PRODUCT HISTORY RECORD
 WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: P [REDACTED] VICTOR W
 DOB: [REDACTED] SSN: [REDACTED]
 TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
 SEARCH AREA: NATIONWIDE
 REQUEST DATE: 8/30/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: SSN LASTNAME FIRSTNAME(VIC) BIRTHDATE
 NAME: P [REDACTED] VICTOR WILD
 DOB: [REDACTED] SSN: [REDACTED]

CRIMINAL RECORD INFORMATION

REPORT TYPE: M MISDEMEANOR

<https://members.dacservices.com/com-asp/ViewReports/SubjectList.aspx?subject=true&...> 8/31/2010

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SEARCH DATE: 06/30/2008
STATE/COUNTY: WV OHIO

NO RECORD FOUND IN JURISDICTION SEARCHED.

ORDER #: 76026279 REQUEST #: 131955080 DATA FILE DATE: 7/1/2008 1:26:05 AM

This inquiry will also be searched against the Dept of the Treasury, Office of Foreign Assets Control SDN and blocked persons list. You will be notified in the event of a possible match.

The following report is obtained from a commercial database that contains information from public records of various courts and law enforcement agencies across the United States. These records are included in the report because the search criteria for matching personal identifiers such as name, date of birth, Social Security Number, etc., suggested that this record(s) matched the information you provided for the subject of the report. As such, these records might relate to the subject you inquired about, but not necessarily. You should use this report to broaden the scope of the background search of the subject to include the jurisdictions and/or the names contained in this report. Employment decisions should not be based solely upon information contained in this report. Positive ID requires fingerprint search.

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<https://members.dacservices.com/com-asp/ViewReports/SubjectList.aspx?subject=true&...> 8/31/2010

STC844080

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SWIFT TRANSPORTATION CO., INC.

2200 S. 75th AVE, PHOENIX, AZ 85043

EMPLOYMENT APPLICATION

QUALIFIED APPLICANTS ARE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, VETERAN STATUS OR DISABILITY.
EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

Date of Application: 08/31/2010

Name: Victor Ye Social Security No. [REDACTED]

Present Address: [REDACTED] Phone: [REDACTED]

Previous Address(es) during last 3 years (FMCSR 391.21 (b)) [REDACTED]

Date of Birth (required by FMCSR 391.21 (2) to verify motor vehicle report): [REDACTED]

In case of emergency notify: TONI [REDACTED] [REDACTED]

Alternate Emergency Phone #: [REDACTED] Name: [REDACTED]

Have you applied for work or/and worked for this company before? ☐ Yes ☒ No When? [REDACTED]

If hired, can you present evidence of your U.S. Citizenship or proof of your legal right to live and work in this country? ☐ Yes ☒ No

Position which applying for: [REDACTED]

Are you able to perform the essential functions and duties of the job as contained in the job description with reasonable accommodation? ☐ Yes ☒ No

How did you find out about Swift? ☐ Newspapers ☐ Brochures & Postcards ☐ Publications ☒ Internet ☐ Swift Transportation Employee

☒ Other

PLEASE READ CAREFULLY

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? ☐ Yes ☒ No

B. Has any license, permit or privilege been suspended or revoked? ☐ Yes ☒ No

C. Have you ever been stopped while intoxicated? ☐ Yes ☒ No

D. Have you ever used any illegal drugs (including marijuana)? ☐ Yes ☒ No If yes, when was the last time? [REDACTED]

E. Have you ever been convicted for possession of, sale, or use of a narcotic drug, amphetamine, or a derivative thereof? ☐ Yes ☒ No

F. Have you ever been convicted of a criminal offense? In California, "crime" shall include convictions for marijuana-related offenses that are more than two years old, as defined in California Health and Safety Code sections 11357 (b) and (c) and 11360 (c), or in California Health and Safety Code sections 11364, 11365, or 11366 of the Health and Safety Code as they related to marijuana prior to January 1, 1976, or their statutory predecessors. ☐ Yes ☒ No

G. Do you currently have any criminal actions pending in which you are a defendant? (A "yes" answer will not necessarily disqualify you from employment.) ☐ Yes ☒ No

H. Are you currently on probation or parole status? (A "yes" answer will not necessarily disqualify you from employment.) ☐ Yes ☒ No

I. 40.25) Have you tested positive, or refused a test, on any pre-employment drug or alcohol test administered by an employer to whom you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in the last three years? ☐ Yes ☒ No

If yes to any of the above questions, state circumstances and date: [REDACTED]

EDUCATION

Highest grade completed: 14 High School Graduate: ☒ Yes ☐ No College Graduate: ☒ Yes ☐ No Graduate School Graduate: ☐ Yes ☐ No

List other Specialty Training or Schools: [REDACTED]

MILITARY STATUS

Have you served in the U.S. Armed Forces? ☐ Yes ☒ No Branch: [REDACTED] Dates: From [REDACTED] To [REDACTED]

Duties: [REDACTED]

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Form 1

Revised 8/07/01

STC644081

REDACTED

EMPLOYMENT RECORD FOR PAST 10 YEARS

All applicants must list all full and part-time employment including military service, self employment, and periods of unemployment during preceding 10 years.
NOTE: List employers in reverse order starting with the most recent. Use an additional sheet if necessary.

From Mo Day Yr Mo Day Yr
08/04/2010 To present
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr Mo Day Yr
04/01/2007 To 08/04/2010
Phone # 937-388-6323
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr Mo Day Yr
To _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr Mo Day Yr
To _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr Mo Day Yr
To _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

CURRENT OR MOST RECENT EMPLOYER

May We Call? Yes ☐ No ☐

Name Sulphor
Address 1701 County line rd Springfield, OH 45365
Position Held Heat mechanic/fabrication
Reason For Leaving Still working, Need a better job

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR) while employed by this previous employer? ☐ Yes ☐ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☐ No

SECOND PRIOR EMPLOYER

May We Call? Yes ☐ No ☐

Name Express Personal
Address 9 Springfield, OH 45305
Position Held _____
Reason For Leaving being hired onto sulphor

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR) while employed by this previous employer? ☐ Yes ☐ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☐ No

THIRD PRIOR EMPLOYER

May We Call? Yes ☐ No ☐

Name _____
Address _____
Position Held _____
Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR) while employed by this previous employer? ☐ Yes ☐ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☐ No

FOURTH PRIOR EMPLOYER

May We Call? Yes ☐ No ☐

Name _____
Address _____
Position Held _____
Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR) while employed by this previous employer? ☐ Yes ☐ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☐ No

FIFTH PRIOR EMPLOYER

May We Call? Yes ☐ No ☐

Name _____
Address _____
Position Held _____
Reason For Leaving _____

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Form 5

Revised 09/1/01

STC644082

REDACTED

DRIVING EXPERIENCE				
CLASS OF EQUIPMENT	TYPE OF EQUIPMENT VAN-TANK-FLAT-ETC	DATES FROM TO		APPROX. NO. OF MILES TOTAL
CLASS A TRUCK				0
TRACTOR AND LOW-BACKED TRAILER				0
TRACTOR AND TWO TRAILERS				0
OTHER				0

LICENSE LIST ALL DRIVERS LICENSES HELD IN PAST FIVE YEARS (NOTE: A COPY of your valid Drivers License or CDL must be attached for your application to be considered)

STATE	LICENSE NUMBER	TYPE	ENDORSEMENTS	EXPIRATION DATE
OK				08/1/2015

MOVING TRAFFIC CONVICTIONS LIST FOR PAST FIVE (5) YEARS, IF NONE WRITE NONE.

DATE	LOCATION (STATE)	CHARGE	PENALTY
NONE			

ACCIDENT RECORD IF NONE WRITE NONE.

IF FALL INVOLVEMENT WITH TRUCK AND CAR INCLUDING PROPERTY DAMAGE FOR PAST FIVE YEARS INCLUDING PREVENTABLE AND NON PREVENTABLE

DATE	TYPE VEHICLE	NATURE OF ACCIDENT (BREATHER, HEAD END, TAIL, ETC)	PREVENTABLE OR NON PREVENTABLE	FATALITIES	INJURIES	AMOUNT OF PROPERTY DAMAGE

STATES IN WHICH YOU HAVE OPERATED A CLASS-A MOTOR VEHICLE IN THE PAST FIVE YEARS

LIST ALL STATES:

REFERENCES (Please list 3 people able to verify your employment and personal history. Such as co-worker, neighbor, customer or an upstanding citizen of your community. Do not list relatives.)

1. Name	JOHN C. [REDACTED]	Relationship	FRIEND
Address	[REDACTED]	Phone #	[REDACTED]
2. Name	ADAM C. [REDACTED]	Relationship	FRIEND
Address	[REDACTED]	Phone #	[REDACTED]

ACKNOWLEDGEMENT

I give Swift Transportation, Inc. (the Company) the right to investigate all references and to secure additional information about me, if so stated. I release from liability the Company and its representatives for securing such information and all other persons, corporations or organizations for furnishing such information. A copy of this page serves as my authorization to seek provide the information I agree to sign all documents and consent forms which the Company deems necessary to verify the facts provided in this application. I give my consent and release from liability the Company and its representatives, its agents or any inquiries made about me as part of a reference check by any subsequent or potential employer.

From time to time the Company may find it necessary to conduct investigations. If it does, employees are expected to truthfully participate and cooperate in such investigations, including submission to searches or property. Failure to do so may subject employees to disciplinary action, which may include termination of employment.

I agree as a condition of employment I will be required to undergo a post-employment medical examination and substance abuse screening test at the expense of and as prescribed by the Company, and that any offer of employment is conditioned upon the successful completion of these tests. I agree to furnish such additional information and undergo any other examinations or tests to complete this employment file, or to continue my employment with the Company, if employed. These tests may include, but are not necessarily limited to random for cause, reasonable suspicion or post-accident alcohol and substance abuse screening tests. Further, I release the Company, its agents or employees from any and all claims or actions arising out of such second and substance abuse tests including, but not limited to, the testing procedures, the analysis or the disclosure of test results.

I understand that any offer of employment is contingent upon my ability to produce documentation verifying my identity and legal authorization to be employed as required by the Immigration Reform and Control Act of 1986 (IRCA).

This Application is valid for sixty (60) days from the date it is completed, or until the specific position opening for which it was submitted is filled, whichever is earlier. Subsequent to the preceding consideration period, I must submit a new application to be considered for this or any other position.

I understand and agree that any misrepresentation, falsification, misreading, misinterpretation or omission of information provided to me in this application will be cause for cancellation of this application and/or termination of my employment if employed. Further, I understand that just as I am free to resign at any time for any reason, with or without cause, the Company reserves the right to terminate my employment at any time, for any reason, with or without prior notice. I understand that no representative of the Company has the authority to make any verbal or written agreement to the Company. I receive a job employment relationship to be an at-will relationship and not for a specific period of time. This application represents the complete and final expression of the intent of the parties and shall not be modified except by a writing duly executed by the undersigned and the President of the Company.

I hereby agree to comply with all applicable laws and regulations relating to the collection and use of personal information. I further agree to the terms of my employment with the Company, of

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Form 1

Revised 09/11/11

STC044083

REDACTED

a consent to that (including all disputes that could be resolved by internal/operational resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration in lieu of any Federal or State investigative, administrative or legal proceeding. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This agreement constitutes the entire agreement between the parties with respect to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

I have read carefully the above information, understood and accept the contents thereof. This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature _____

Date _____

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Revised 8/01/05

STC644084

REDACTED



STATE OF OHIO VS. P [REDACTED] VICTOR W (FPD
SAW)

Prelim Case Nbr
POLICE DEPA

Jurisdiction FAIRBORN

Defendant

Full Name P [REDACTED] VICTOR W

D.O.B [REDACTED]

Address

City/State/Zip

Attorney(s)

PATRY, SIMON

Case Information

Action Code 2913.02A1
Description THEFT
Degree of Off. Felony 4th Degree
Charge Descr
Offense Date 03/01/2008
Arrest Date 07/05/2008
Officer
Complainant
Prosecutor
Judge WOLAVER, STEPHEN A

Additional Fields

BOND AMOUNT
BOND REFUNDED TO
REFUND ADDRESS

Case Comments

ARRESTMENT SET:
AUGUST 1, 2008 AT 1:00 PM
PUBLIC DEFENDER

Case Attributes

Number [REDACTED]

Filed 07/11/2008

Status Closed/Dismissed

REDACTED

STC644085

SSN	[REDACTED]	Change SS	Received By	State	Interview ID Stamp
Name	VICTOR W P		0000	<input type="radio"/> Open <input type="radio"/> Pending <input checked="" type="radio"/> Approved <input type="radio"/> Declined <input type="radio"/> Closed	
Birth day	[REDACTED]		00/00/00	<input type="button" value="Close and Reopen"/>	

General Questions		Level 1 Review	Offenses: [] Theft [] Drug [] Sex
Yes No N/A	1. All identifiers verified? 2. Any other arrest or convictions? 3. Any charges pending now? 4. Any other names used? 5. Any weapons involved? 6. Domestic issue? 7. Misdemeanor? 8. Felony? 9. Ever been terminated? 10. Ever used drugs? What: [] When: [] 11. Ever tested positive or refused a drug or alcohol test? What: [] When: []	<input checked="" type="checkbox"/> Requested <input checked="" type="checkbox"/> Completed <input type="checkbox"/> Requested <input type="checkbox"/> Completed <input type="checkbox"/> Requested <input type="checkbox"/> Completed	

General Summary	Notes wild 2008- THEFT- FELONY- DROPPED EMPLOYED 9/8/10 ADDITIONAL CHECKS ORDERED, FILE PENDING.FLORAN 9/14/10 WIDESCREEN HAS HIT, COURT DOCS SHOW DISMISSED W/SAME CASE NUMBER ON WIDESCREEN APPLICATIONS RECORD, WILL APPROVE.FLORAN
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STC644088

REDACTED

Documents	
1	WIDE SCREEN
2	FILE
3	Assessment
4	Additional Checks
5	
6	

N, NO CRIMINAL CONVICTIONS

[REDACTED]

STC644087

REDACTED

EXHIBIT 9



Conviction Form

Please Print Information

Applicant's Name: Jamarlo A B Social Security Number: [REDACTED]
Daytime Phone #: [REDACTED] After Hours Phone #: [REDACTED]
Date of Birth: [REDACTED]

Date of Arrest:	_____	Date of Arrest:	_____
Charge 1:	_____	Charge 2:	_____
Location:	_____	Location:	_____
	County State		County State
Date of Conviction:	_____	Date of Conviction:	_____
Charge:	_____	Charge:	_____
Sentence:	_____	Sentence:	_____
Time Served:	_____	Time Served:	_____
Dates on Probation or Parole:	_____	Dates on Probation or Parole:	_____

* Any other arrests or convictions? ☐ Yes ☐ No

Any charges pending now? ☐ Yes ☐ No

Any other names used maiden, married, etc. _____

Please describe what happened:

Comments on Charge 1:

Comments on Charge 2:

Signature of Applicant: _____ Date: _____
Recruiter Name: _____ Terminal: _____

REDACTED

STC844088

View Reports - Subject List

Page 1 of 9

Customer: Swift Transportation Web
User: Berenice Ruiz

VIEW REPORTS - SUBJECT LIST

We are pleased to announce that USIS Commercial Services, Inc. has changed its name to HireRight Solutions, Inc. While for a period of time you may find reference made in our materials to USIS Commercial Services, we are in the process of updating our web sites, software applications and documents to reflect this name change and expect to complete all updates in the near future. In the meantime, should you have any questions please contact us at: 800-322-9651 and select Option 3 for Customer Service.

Please Note: The information contained in this report is based on search criteria matching certain personal identifiers that indicate that this information matched the consumer who is the subject of the report. However, this information is not guaranteed for accuracy or truthfulness as it relates to the subject of this report. The information contained in this report was accurately copied from HireRight's supplier(s) of such information, including the public records of various courts and law enforcement agencies; credit bureaus; laboratorles; etc., as applicable. However, information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of this report. Employment decisions should not be based solely upon information contained in this report. Positive ID requires a fingerprint search. The user of this report is responsible for following applicable local, state and federal laws with respect to the procurement and use of this information.

<https://members.dacservices.com/com-asp/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC644089

REDACTED

View Reports - Subject List

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Criminal Records, County

Customer: Swift Transportation Web (104508)
 Actor: Mary Johnson (5365Mary)
 Customer Reference: SHERONDIA MCNEAL
 Customer Sub: 341

Subject Name: Jamario A B
 Subject DOB:
 Subject SSN:
 Subject Race:
 Subject Gender:
 Search Type: F
 Search State: MS
 Search County: COPIAH
 Result Comments:
 Report Number: 1480744
 Request ID: 43713186
 Request Date: 4/23/2010 9:08:27 AM
 Report Date: 5/3/2010 9:00:41 AM
 Reference: SHERONDIA MCNEAL

CRIMINAL SEARCH RESULTS

Case Number:
 File Date: 10/2/2004
 Arrest Date:
 Offense Date:
 Agency Loc:
 Agency Type: CIRCUIT COURT
 Case Comments:

Identifying Info		DOB:	Matching Criteria
Name:	JAMARIO A B	SID:	<input checked="" type="checkbox"/> Last Name
Birth Place:		FID:	<input checked="" type="checkbox"/> First Name
SSN on Record:		DL#:	<input checked="" type="checkbox"/> Middle Name
Height:		DL State:	<input checked="" type="checkbox"/> DOB
Weight:		Gender:	<input type="checkbox"/> SSN
Eye Color:		Race:	<input type="checkbox"/> Address
Hair Color:		Address:	
Markings:			

Other:

Matched on: First Name, Middle Name, Last Name and DOB
 Data inconsistent with the requested criteria

Count: 1

Original Statute:	Final Statute:
Original Charge:	Final Charge: Burglary of a Vehicle
Original Type:	Final Type: Felony
Original Class:	Final Class:
Plea:	Plea Date:
Degree:	Final Degree:
OrigDisposition:	Disposition: Guilty
OrigDispDate:	DispDate: 1/12/2006

<https://members.dacservices.com/com-asp/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC844090

REDACTED

View Reports - Subject List

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Comments:
Appeal Comments:

SentenceDate	Type	Active	Suspended	Completed
	OTHER			

Comments: 2 years probation.

Record check for requested search area only. National record status unknown. Positive ID requires fingerprint search. Employment evaluation should not be based on search results. Provider cannot act as the guarantor of the information accuracy or completeness. Appropriate use of the information contained in this report may be governed by both federal and state laws and it is the responsibility of the user to comply with all applicable laws.

<https://members.dacservices.com/com-nsp/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC844001

REDACTED

View Reports - Subject List

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Criminal Records, County

Customer: Swift Transportation Web (1046001)
 Actor: Mary Johnson (5365Mary)
 Customer Reference: SHERONDIA MCNEAL
 Customer Sub: 341

Subject Name: Jamarlo A B [REDACTED]
 Subject DOB: [REDACTED]
 Subject SSN: [REDACTED]
 Subject Race:
 Subject Gender:
 Search Type: B
 Search State: MS
 Search County: HINDS
 Result Comments:

Report Number: 1480744
 Request ID: 43713183
 Request Date: 4/23/2010 9:06:26 AM
 Report Date: 5/3/2010 9:00:41 AM
 Reference: SHERONDIA MCNEAL

CRIMINAL SEARCH RESULTS

Case Number: [REDACTED]
 File Date: 1/25/2004
 Arrest Date:
 Offense Date:
 Agency Loc:
 Agency Type:
 Case Comments:

Identifying Info	DOB: [REDACTED]	Matching Criteria
Name: Jamarlo B [REDACTED]	SID: [REDACTED]	<input checked="" type="checkbox"/> Last Name
Birth Place: [REDACTED]	FID: [REDACTED]	<input checked="" type="checkbox"/> First Name
SSN on Record: [REDACTED]	DL#: [REDACTED]	<input type="checkbox"/> Middle Name
Height:	DL State:	<input checked="" type="checkbox"/> DOB
Weight:	Gender:	<input checked="" type="checkbox"/> SSN
Eye Color:	Race:	<input type="checkbox"/> Address
Hair Color:	Address:	
Markings:		

Other:

Matched on: First Name, Last Name, DOB, and SSN
 Data Inconsistent with the requested criteria.

Count: 1	Final Statute:
Original Statute:	Final Charge: Auto Burglary
Original Charge:	Final Type: Felony
Original Type:	Final Class:
Original Class:	Plas Date:
Plas:	Final Degree:
Degree:	Disposition: This case is still active
OrigDisposition:	DispDate:
OrigDispDate:	

<https://members.dacservices.com/com-uspx/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

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REDACTED

View Reports - Subject List

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Comments:
Appeal Comments:

SentenceDate	Type	Active	Suspended	Completed
	OTHER			

Comments: no further information available.

Record check for requested search area only. National record status unknown. Positive ID requires fingerprint search. Employment evaluation should not be based on search results. Provider cannot act as the guarantor of the information accuracy or completeness. Appropriate use of the information contained in this report may be governed by both federal and state laws and it is the responsibility of the user to comply with all applicable laws.

<https://members.dacservices.com/com-asp/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC844093

REDACTED

View Reports - Subject List

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Widescreen National Criminal Search

Customer: Swift Transportation Web (104508)
 Actor: Mary Johnson (5365Mary)
 Customer Reference: SHERONDA MCNEAL
 Customer Sub: 341

USIS COMMERCIAL SERVICES, INC.

WIDESCREEN PACKAGE PRODUCT HISTORY RECORD

WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: B JAMARIO A
 DOB: SSN:
 TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
 SEARCH AREA: NATIONWIDE
 REQUEST DATE: 4/22/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: LASTNAME FIRSTNAME(JAM) BIRTHDATE
 NAME: B JAMARIO
 GENDER: MALE RACE: BLACK

CRIMINAL RECORD INFORMATION

IN THE CASE OF POTENTIAL MATCHES
 IN THE WIDESCREEN DATABASE, RECORDS
 WILL BE ORDERED FROM THE ORIGINAL
 SOURCE TO VERIFY ACCURACY AND CURRENCY.
 FINAL RESULTS MAY OR MAY NOT RESULT IN
 A TRUE MATCH.

ORDER #: 12722635 REQUEST #: 126311507

USIS COMMERCIAL SERVICES, INC.
WIDESCREEN PACKAGE PRODUCT HISTORY RECORD

WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: B JAMARIO A
 DOB: SSN:
 TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
 SEARCH AREA: NATIONWIDE
 REQUEST DATE: 4/22/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: SSN LASTNAME FIRSTNAME(JAM) BIRTHDATE
 NAME: B JAMARIO
 DOB: SSN:

CRIMINAL RECORD INFORMATION

<https://members.dacservices.com/com.aspx/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC844094

REDACTED

View Reports - Subject List

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REPORT TYPE: F FELONY
 SEARCH DATE: 05/17/2008
 STATE/COUNTY: MS FORREST

NO RECORD FOUND IN JURISDICTION SEARCHED.

ORDER #: 72722635 REQUEST #: 126311807 DATA FILE DATE: 5/13/2008 1:18:52 AM

USIS COMMERCIAL SERVICES, INC.
 WIDESCREEN PACKAGE PRODUCT HISTORY RECORD

WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: B [REDACTED] JAMARIO A
 DOB: [REDACTED] SSN: [REDACTED]
 TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
 SEARCH AREA: NATIONWIDE

REQUEST DATE: 4/22/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: SSN LASTNAME FIRSTNAME(JAM) BIRTHDATE
 NAME: B [REDACTED] JAMARIO
 DOB: [REDACTED] SSN: [REDACTED]

CRIMINAL RECORD INFORMATION

REPORT TYPE: M MISDEMEANOR
 SEARCH DATE: 05/12/2008
 STATE/COUNTY: MS FORREST

NO RECORD FOUND IN JURISDICTION SEARCHED.

ORDER #: 72722635 REQUEST #: 126311807 DATA FILE DATE: 5/13/2008 1:18:52 AM

USIS COMMERCIAL SERVICES, INC.
 WIDESCREEN PACKAGE PRODUCT HISTORY RECORD

WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: B [REDACTED] JAMARIO A
 DOB: [REDACTED] SSN: [REDACTED]
 TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
 SEARCH AREA: NATIONWIDE

REQUEST DATE: 4/22/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: SSN LASTNAME FIRSTNAME(JAM) BIRTHDATE
 NAME: B [REDACTED] JAMARIO
 DOB: [REDACTED] SSN: [REDACTED]

CRIMINAL RECORD INFORMATION

REPORT TYPE: M MISDEMEANOR
 SEARCH DATE: 05/14/2008
 STATE/COUNTY: MS HINDS

NO RECORD FOUND IN JURISDICTION SEARCHED.

<https://members.dacservices.com/com.aspx/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC644095

REDACTED

View Reports - Subject List

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ORDER #: 72722635 REQUEST #: 126311807 DATA FILE DATE: 5/15/2008 1:44:53 AM

USIS COMMERCIAL SERVICES, INC.
WIDESCREEN PACKAGE PRODUCT HISTORY RECORD

WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: B [REDACTED] JAMARIO A [REDACTED]
DOB: [REDACTED] SSN: [REDACTED]
TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
SEARCH AREA: NATIONWIDE
REQUEST DATE: 6/27/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: SSN LASTNAME FIRSTNAME(JAM) BIRTHDATE
NAME: B [REDACTED] JAMARIO
DOB: [REDACTED] SSN: [REDACTED]

CRIMINAL RECORD INFORMATION

REPORT TYPE: M MISDEMEANOR
SEARCH DATE: 05/15/2008
STATE/COUNTY: MS COPIAH

NO RECORD FOUND IN JURISDICTION SEARCHED

ORDER #: 72722635 REQUEST #: 126311807 DATA FILE DATE: 5/16/2008 1:22:42 AM

USIS COMMERCIAL SERVICES, INC.
WIDESCREEN PACKAGE PRODUCT HISTORY RECORD

WIDESCREEN PACKAGE PRODUCT REQUEST INFORMATION

NAME: B [REDACTED] JAMARIO A [REDACTED]
DOB: [REDACTED] SSN: [REDACTED]
TYPE OF SEARCH: CRIMINAL SEARCH / SEX OFFENDER SEARCH
SEARCH AREA: NATIONWIDE
REQUEST DATE: 4/22/2010

WIDESCREEN PACKAGE PRODUCT FILE INFORMATION

MATCH WAS MADE USING: SSN LASTNAME FIRSTNAME(JAM) BIRTHDATE
NAME: B [REDACTED] JAMARIO ANTONNE
DOB: [REDACTED] SSN: [REDACTED]

CRIMINAL RECORD INFORMATION

REPORT TYPE: M MISDEMEANOR
SEARCH DATE: 03/08/2010
STATE/COUNTY: MS COPIAH

NO RECORD FOUND IN JURISDICTION SEARCHED

ORDER #: 72722635 REQUEST #: 126311807 DATA FILE DATE: 3/9/2010 1:24:31 AM

This inquiry will also be searched against the Dept of the Treasury, Office of Foreign Assets Control SDN and blocked persons list. You will be notified in the event of a possible match.

<https://members.dacservices.com/com.aspx/ViewReports/SubjectList.aspx?subject=true&A...> 5/3/2010

STC844098

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View Reports - Subject List

Page 9 of 9

The following report is obtained from a commercial database that contains information from public records of various courts and law enforcement agencies across the United States. These records are included in the report because the search criteria for matching personal identifiers such as name, date of birth, Social Security Number, etc., suggested that this record(s) matched the information you provided for the subject of the report. As such, these records might relate to the subject you inquired about, but not necessarily. You should use this report to broaden the scope of the background search of the subject to include the jurisdictions and/or the names contained in this report. Employment decisions should not be based solely upon information contained in this report. Positive ID requires a fingerprint search.

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STC644007

REDACTED

SWIFT TRANSPORTATION CO., INC.

2200 S. 75th AVE., PHOENIX, AZ, 85043

EMPLOYMENT APPLICATION

QUALIFIED APPLICANTS ARE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, VETERAN STATUS OR DISABILITY
EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

Date of Application: 05/03/2010

Name B [REDACTED] Jameno A

Social Security No. [REDACTED]

Present Address [REDACTED]

Phone [REDACTED]

Previous Address(es) during last 3 years if FMC5R 591.21 (3)

Date of Birth (required by FMC5R 591.21 (2) to verify motor vehicle report) [REDACTED]

In case of emergency notify DELO'S BOJIE (MOTHER)

Alternate Emergency Phone # [REDACTED]

Name [REDACTED]

Have you applied for work and/or worked for this company before? ☐ Yes ☒ No When? [REDACTED]If hired, can you present evidence of your U.S. Citizenship or proof of your legal right to live and work in this country? ☐ Yes ☒ No

Position which applying for: [REDACTED]

Are you able to perform the essential functions and duties of the job as contained in the job description with reasonable accommodation? ☐ Yes ☒ NoHow did you find out about Swift? ☐ Newspaper ☐ Brochures & Postcards ☐ Publications ☒ Internet ☐ Swift Transportation Employee

PLEASE READ CAREFULLY

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? ☐ Yes ☒ NoB. Has any license, permit or privilege been suspended or revoked? ☐ Yes ☒ NoC. Have you ever been stopped while intoxicated? ☐ Yes ☒ NoD. Have you ever used any illegal drugs (including marijuana)? ☐ Yes ☒ No If yes, when was the last time? ☐ Yes ☒ NoE. Have you ever been convicted for possession of, sale, or use of a narcotic drug, amphetamine, or a derivative thereof? ☐ Yes ☒ NoF. Have you ever been convicted of a criminal offense in California, "Crime" that exclude convictions for marijuana-related offenses that are more than two years old, as defined in California Health and Safety Code sections 11357 (b) and (c) and 11360 (a), or in California Health and Safety Code sections 11364, 11365, or 11359 of the Health and Safety Code as they related to marijuana prior to January 1, 1976, or their statutory predecessors. ☐ Yes ☒ NoG. Do you currently have any criminal actions pending in which you are a defendant? (A "yes" answer will not necessarily disqualify you from employment.) ☐ Yes ☒ NoH. Are you currently on probation or parole status? (A "yes" answer will not necessarily disqualify you from employment.) ☐ Yes ☒ NoI. (40.29) Have you tested positive, or refused a test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not receive safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in the last three years? ☐ Yes ☒ No

If yes to any of the above questions, list circumstances and dates: [REDACTED]

EDUCATION

Highest grade completed: 12 High School Graduate: ☒ Yes ☐ No College Graduate: ☐ Yes ☒ No Graduate School Graduate: ☐ Yes ☒ No

List other secondary schooling or schools: [REDACTED]

MILITARY STATUS

Have you served in the U.S. Armed Forces? ☐ Yes ☒ No Branch [REDACTED] Dates From [REDACTED] To [REDACTED]

Enlistment [REDACTED]

A-101

Form 1

Revised 5/2/03

STC644099

REDACTED

EMPLOYMENT RECORD FOR PAST 10 YEARS

All applicants must list all full and part-time employment including military service, self employment, and periods of unemployment during preceding 10 years.
NOTE: List employers in reverse order starting with the most recent. Use an additional sheet if necessary.

From Mo Day Yr 08/2007 To Mo Day Yr 09/2008
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr 06/2002 To Mo Day Yr 07/2007
Phone # 6017543051
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr 03/2010 To Mo Day Yr 04/2010
Phone # 6015020730
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr 10/2008 To Mo Day Yr 02/2010
Phone # _____
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr _____ To Mo Day Yr _____
Phone # _____
Supervisor _____
Type of Equip. Driven _____

CURRENT OR MOST RECENT EMPLOYER

May We Call? Yes _____ No _____

Name BOC COATING
Address BYHAM, MS 38059
Position Held FLOORMAN

Reason For Leaving LAI D OFF

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☒ No

SECOND PRIOR EMPLOYER

May We Call? Yes _____ No _____

Name CORTEX BYRD INC
Address BROOKHAVEN, MS 38009
Position Held SHOP HELPER

Reason For Leaving MORE MONEY

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☒ No

THIRD PRIOR EMPLOYER

May We Call? Yes _____ No _____

Name ACE TRAINING CENTER INC
Address 155 SOUTH EAST FRONTAGE ROAD BYHAM, MS 38059
Position Held CDL STUDENT

Reason For Leaving GRADUATION

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☒ No

FOURTH PRIOR EMPLOYER

May We Call? Yes _____ No _____

Name UNEMPLOYED
Address MS
Position Held UNEMPLOYED

Reason For Leaving _____

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☒ No

FIFTH PRIOR EMPLOYER

May We Call? Yes _____ No _____

Name _____
Address _____
Position Held _____

B-101

Form 1

Revised 8/2/01

STC644000

REDACTED

DRIVING EXPERIENCE				
CLASSES OF EQUIPMENT	TYPE OF EQUIPMENT VAN-TRUCK-PLAT-ETC.	DATES FROM TO		APPROX. NO. OF MILES TOTAL
STRAIGHT TRUCK				0
TRACTOR AND SEMI-TRAILER	TRUCK AND 53 FOOT TRAILER			0
TRACTOR AND TWO TRAILERS				0
OTHER				0

LICENSE LIST ALL DRIVERS LICENSES HELD IN PAST FIVE YEARS (NOTE: A COPY of your valid drivers license or CDL must be attached to your application to be considered)

STATE	LICENSE NUMBER	TYPE	ENDORSEMENTS	EXPIRATION DATE
MS		CDL		06/21/2015

MOVING TRAFFIC CONVICTIONS LIST FOR PAST FIVE (5) YEARS. IF NONE WRITE NONE.

DATE	LOCATION (STATE)	CHARGE	PENALTY
06/20/2008	MISSISSIPPI	CARELESS DRIVING	FINE
06/20/2008	MISSISSIPPI	SPEEDING	FINE

ACCIDENT RECORD IF NONE WRITE NONE.
LIST ALL INVOLVEMENT WITH TRUCK AND CAR INCLUDING PROPERTY DAMAGE FOR PAST FIVE YEARS, WHETHER PREVENTABLE AND NON-PREVENTABLE.

DATE	VEHICLE TYPE	NUMBER OF ACCIDENT (REASON: REVERSAL, UPSET, ETC.)	INDICATE PREVENTABLE OR NON-PREVENTABLE	FATALITIES	INJURIES	AMOUNT OF PROPERTY DAMAGE
NONE						

STATES IN WHICH YOU HAVE OPERATED A CLASS-A MOTOR VEHICLE IN THE PAST FIVE YEARS

LIST ALL STATES:

REFERENCES (Please list 2 people able to verify your employment and personal history. Such as co-worker, neighbor, customer or an outstanding citizen of your community. Do not list relatives.)

1. Name	NAYOSHA A	Relationship	FRIENDS
Address		Phone #	
2. Name	DELOIS B	Relationship	MOTHER
Address		Phone #	

ACKNOWLEDGEMENT

I, [Name], Transportation Inc, the Company, the right to investigate all references and to request additional information about me, if provided, I release from liability the Company and its representatives for seeking such information and all other persons, companies or organizations for furnishing such information. A copy of this page serves as my authorization of seeking such information. I agree to sign all documents and consent letters which the Company deems necessary to verify the facts provided in this application. I give my consent and release from liability the Company and its representatives to respond to any inquiries made about me as part of a reference check by any subsequent or potential employer.

From time to time the company may find it necessary to conduct investigations. It does, employees are expected to fully participate and cooperate in such investigations, including submission to searches of property. Failure to do so may subject employees to disciplinary action, which may include termination of employment.

I realize that a condition of employment will be required to undergo a post-employment medical examination and substance abuse screening test at the expense of and are prescribed by the Company, and that any offer of employment is conditioned upon the successful completion of these tests. I agree to comply with all medical examinations and submit to any substance abuse screening tests. I agree to provide the Company with all necessary information and submit to any substance abuse screening tests. Further, I release the Company, its agents or employees from any and all claims or actions arising out of or from such or substance abuse tests including, but not limited to, the testing procedure, the analysis of the elements of test results.

I understand that any offer of employment is contingent upon my ability to provide documentation verifying my identity and legal authorization to be employed, as required by the Immigration Reform & Control Act of 1986 (IRCA).

This application is valid for 180 days from the date it is completed, or until the specific position for which it was submitted is closed, whichever is earlier. Subsequent to the preceding authorization period, I must submit a new application to be considered for this or any other position.

I understand and agree that any misrepresentation, inaccurate, misleading, incomplete or omitted information provided by me in this application will be sufficient cause for revocation of my application and/or termination of my employment by the Company. I understand that as soon as I am free to resign at any time, for any reason, with or without prior notice, the Company reserves the right to terminate my employment at any time, for any reason, with or without prior notice. I understand that no representative of the Company has the authority to make any verbal or written representation to the employer. I recognize the employment relationship to be an at-will relationship and that for a period of time, this application represents the complete and final explanation of the terms and conditions of my employment as indicated except by a writing duly executed by the employer and the President or the Company.

I hereby agree to submit binding arbitration of disputes and claims arising out of the submission of this or other application, further to be in the event that I am offered employment by the company, or a condition to that employment, all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be

B-101

Form 1

Revised 6/2007

STC644100

REDACTED

submitted to binding arbitration in lieu of any Federal or State investigative, administrative or legal proceeding. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements or dispute resolution, either oral or written.

I have read carefully the above information, understand and accept its contents thereof. This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature _____

Date _____

A-101

Form 1

Revised 8/21/01

STC844101

REDACTED

IN THE CIRCUIT COURT OF HINDS COUNTY, MISSISSIPPI
FIRST JUDICIAL DISTRICT

STATE OF MISSISSIPPI

VS.

JAMARIO ANTHONIE B.

Ethnicity: Black
Gender: Male
Date of Birth: [REDACTED]
Social Security No.: [REDACTED]
Agency Case No.: 04-324
Originating: Hinds County, Mississippi
Sheriff's Department

ORDER OF DISMISSAL AND EXPUNGEMENT

This day this cause came on to be heard upon motion of the Petitioner to dismiss this cause and to expunge from all official records all recordations relating to the Petitioner's arrest, charge and disposition in this cause, and the Court, having considered same, finds that said motion is well-taken and should be granted, based upon the following:

- I. Information regarding charge(s) is/are as follows:
 - a. Date of Arrest: January 25, 2004
 - b. Arresting Agency: Hinds County, Mississippi Sheriff's Department
 - c. Charge(s) Arrested For:
 - a. Auto burglary
 - b. possession of burglary tools
 - c. receiving stolen goods
 - d. Charge(s) indicted for:
Auto burglary

STC844102

REDACTED

- e. Indictment Date: June 10, 2004
- f. Capias Served Date: July 12, 2004 (by Hinds County, Mississippi Sheriff's Dept.)
- g. Date of Disposition: November 19, 2004
- h. Disposition: Adjudication of Guilt withheld; placed under supervision of the Mississippi Department of Corrections for a term of two (2) years.
- i. Date discharged from probation: May 18, 2007
- j. Other pertinent information:

2. The Defendant was initially arrested for three (3) charges, auto burglary, possession of burglary tools and receiving stolen property. He was only prosecuted for the auto burglary charge.

- 2. Section 99-15-26 (4), Mississippi Code, 1972, as amended, provides that upon successful completion of court-imposed conditions related to a non-adjudicated disposition, the Court shall direct that the cause be dismissed and the case closed.
- 3. Section 99-15-26(5) provides that the court shall expunge the record of any cases dismissed/charges dropped or there was no disposition of such case.
- 4. The Court finds that the Petitioner, JAMARIO A. [REDACTED] has complied with all of the Court imposed conditions related to his non-adjudicated disposition herein, and that this case should be dismissed and closed, and all recordation related thereto expunged as provided by law.

IS THEREFORE, ORDERED AND DIRECTED THAT this cause be dismissed and closed and that the Circuit Clerk of Hinds County, Mississippi, the County Court of Hinds County, Mississippi, the Hinds County Sheriff's Department, the Hinds County Detention Center, the Criminal Justice Information Center of the State of Mississippi, the Criminal Identification Division of the Federal Bureau of Investigation and any other agency or department in possession of any official records and/or

[REDACTED]

STC044103

identification data forthwith expunge any and all records and/or recordation including, but not limited to, docket entries, indictment, motions, orders, affidavits, arrest warrants, mug shots, and/or fingerprints relating to the arrest and/or dismissal of the above-named defendant in the above-styled and numbered cause.

Further, the effect of this order shall be to restore the above-named Defendant/Petitioner, JAMARIO ANTRONNIE B [REDACTED] in the contemplation of the law, to the status he occupied before such arrest and charge, and the said Defendant/Petitioner, JAMARIO ANTRONNIE B [REDACTED] shall not be guilty of perjury or otherwise giving a false statement by reason of his failure to rectify or acknowledge such arrest and/or charge in response to any inquiry made of him for any purpose.

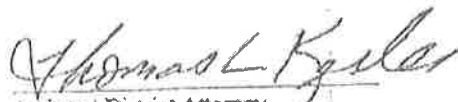
SO ORDERED AND ADJUDGED, this the 17th day of April, 2009.


CIRCUIT JUDGE

Requested by:

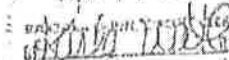

Thomas R. Mayfield

Agreed:


Assistant District Attorney
For the State

ATTEST A TRUE COPY

APR 17 2009


CLERK

STC644104

REDACTED

Documents	
1	WIDESCREEN
2	FILE
3	Court Docs
4	
5	
6	

D.
CHARGES BECAUSE HE NEVER
WE ARE TAKING TO LONG

REDACTED

STC644108

EXHIBIT 10



Conviction Form

Please Print Information

Applicant's Name: **Darrel L R** Social Security Number: **[REDACTED]**
 Daytime Phone #: **[REDACTED]** After Hours Phone #: **[REDACTED]**
 Date of Birth: **[REDACTED]**

Date of Arrest:	_____	Date of Arrest:	_____
Charge 1:	_____	Charge 2:	_____
Location:	_____	Location:	_____
	County State		County State
Date of Conviction:	_____	Date of Conviction:	_____
Charge:	_____	Charge:	_____
Sentence:	_____	Sentence:	_____
Time Served:	_____	Time Served:	_____
Dates on Probation or Parole:	_____	Dates on Probation or Parole:	_____

* Any other arrests or convictions?: ☐ Yes ☐ No

Any charges pending now? ☐ Yes ☐ No

List full name (First/Middle/Last):

Any other names used maiden, married, etc.

Please describe what happened:

Comments on Charge 1:

Comments on Charge 2:

Signature of Applicant: _____ Date: ____/____/____

Recruiter Name: _____ Terminal: _____

REDACTED

STC644127

View Reports - Subject List

Page 1 of 4

Customer: Swift Transportation Web
User: Patricia Ramos

VIEW REPORTS - SUBJECT LIST

We are pleased to announce that USIS Commercial Services, Inc. has changed its name to HireRight Solutions, Inc. While for a period of time you may find reference made in our materials to USIS Commercial Services, we are in the process of updating our web sites, software applications and documents to reflect this name change and expect to complete all updates in the near future. In the meantime, should you have any questions please contact us at: 800-322-8651 and select Option 3 for Customer Service.

Please Note: The information contained in this report is based on search criteria matching certain personal identifiers that indicate that this information matched the consumer who is the subject of the report. However, this information is not guaranteed for accuracy or truthfulness as it relates to the subject of this report. The information contained in this report was accurately copied from HireRight's supplier(s) of such information, including the public records of various courts and law enforcement agencies; credit bureaus; laboratories; etc., as applicable. However, information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of this report. Employment decisions should not be based solely upon information contained in this report. Positive ID requires a fingerprint search. The user of this report is responsible for following applicable local, state and federal laws with respect to the procurement and use of this information.

<https://members.dacservices.com/com.aspx/ViewReports/SubjectList.aspx?request=12160...> 1/13/2010

STC644128

REDACTED

View Reports - Subject List

Page 2 of 4

Criminal Records, County

Customer: Swift Transportation Web (104408)
 Actor: Mary Johnson (3365Mary)
 Customer Reference: DONALD ANDERSON JR
 Customer Sub: 112

Subject Name: Darrel L R [REDACTED]
 Subject DOB: [REDACTED]
 Subject SSN: [REDACTED]
 Subject Race: [REDACTED]
 Subject Gender: [REDACTED]
 Search Type: B
 Search State: OK
 Search County: TULSA
 Result Comments: [REDACTED]

Report Number: 1464691
 Request ID: 42579242
 Request Date: 1/11/2010 5:34:18 PM
 Report Date: 1/13/2010 9:08:58 AM
 Reference: DONALD ANDERSON JR

CRIMINAL SEARCH RESULTS

Case Number: [REDACTED]
 File Date: 10/4/2001
 Arrest Date:
 Offense Date:
 Agency Loc:
 Agency Type:
 Case Comments:

Identifying Info

Name: Darrell Lee R [REDACTED]
 BirthPlace:
 SSN on Record:
 Height: 6'4"
 Weight: 235
 Eye Color:
 Hair Color:
 Markings:

DOB: [REDACTED]
 SID:
 FID:
 DL#:
 DL State:
 Gender: Male
 Race: White
 Address: [REDACTED]

Matching Criteria

☒ Last Name
☐ First Name
☒ Middle Name
☒ DOB
☐ SSN
☐ Address

Other:

Matched on: Middle Name, Last Name, and DOB
 Data inconsistent with the requested criteria: First Name

Count: 1

Original Statute:
 Original Charge:

Original Type:
 Original Class:
 Plea:
 Degree:
 OrigDisposition:

Final Statute:

Final Charge: Domestic Assault and Battery in Presence
 of a Minor Child

Final Type: Misdemeanor

Final Class:

Plea Date:

Final Degree:

Disposition: Dismissed

<https://members.dacservices.com/com.aspx/ViewReports/SubjectList.aspx?request=12160...> 1/13/2010

STC044129

REDACTED

OrigDispDate:
Comments:
Appeal Comments:

DispDate: 4/18/2004

Count: 2
Original Statute:
Original Charge:
Original Type:
Original Class:
Plea:
Degree:
OrigDisposition:
OrigDispDate:
Comments:
Appeal Comments:

Final Statute:
Final Charge: Malignous Injury to Property
Final Type: Misdemeanor
Final Class:
Plea Date:
Final Degree:
Disposition: THIS CASE IS STILL ACTIVE
DispDate: 4/16/2004

Case Number: [REDACTED]
 File Date: 1/9/2004
 Arrest Date:
 Offense Date:
 Agency Loc:
 Agency Type:
 Case Comments:

Identifying Info

Name: Darrell Lee R
BirthPlace:
SSN on Record:
Height: 6'4"
Weight: 236
Eye Color:
Hair Color:
Markings:

DOB: [REDACTED]
SID: [REDACTED]
FID: [REDACTED]
DL#: [REDACTED]
DL State: [REDACTED]
Gender: Male
Race: White
Address: [REDACTED]

Matching Criteria

☒ Last Name
☐ First Name
☒ Middle Name
☒ DOB
☐ SSN
☐ Address

Other:

Matched on: Middle Name, Last Name, and DOB
Data inconsistent with the requested criteria: First Name

Count: 1
Original Statute:
Original Charge:
Original Type:
Original Class:
Plea:
Degree:
OrigDisposition:
OrigDispDate:
Comments:
Appeal Comments:

Final Statute:
Final Charge: Assault and Battery Domestic
Final Type: Misdemeanor
Final Class:
Plea Date:
Final Degree:
Disposition: Dismissed
DispDate: 8/21/2004

Record check for requested search area only. National record status unknown. Positive ID requires fingerprint search. Employment

<https://members.ducservices.com/com.aspx/ViewReports/SubjectList.aspx?request=12160...> 1/13/2010

STCE44139

REDACTED

View Reports - Subject List

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evaluation should not be based on search results. Provider cannot act as the guarantor of the information accuracy or completeness. Appropriate use of the information contained in this report may be governed by both federal and state laws and it is the responsibility of the user to comply with all applicable laws.

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STC644131

REDACTED

SWIFT TRANSPORTATION CO., INC.

2200 N. 75th AVE, PHOENIX, AZ 85043

EMPLOYMENT APPLICATION

QUALIFIED APPLICANTS ARE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, VETERAN STATUS OR DISABILITY.
EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

Date of Application: 08/08/2012

Name: [REDACTED] Darrel L.

Social Security No. [REDACTED]

Present Address: [REDACTED]

Phone: [REDACTED]

Previous Address(es) during last 3 years (FMCSR 391.21 (3))

[REDACTED]

Date of Birth (required by FMCSR 391.21 (2) to verify motor vehicle report)

[REDACTED]

In case of emergency notify

Alternate Emergency Phone #

Name

Have you applied for work and/or worked for this company before?

☐ Yes ☒ No When?If hired, can you present evidence of your U.S. Citizenship or proof of your legal right to live and work in this country? ☐ Yes ☒ No

Position which applying for

Are you able to perform the essential functions and duties of the job as contained in the job description with reasonable accommodation? ☐ Yes ☒ No

How did you find out about Swift? Internet

PLEASE READ CAREFULLY

A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? ☐ Yes ☒ NoB. Has any license, permit or privilege been suspended or revoked? ☐ Yes ☒ NoC. Have you ever been stopped while intoxicated? ☐ Yes ☒ NoD. Have you ever used any illegal drugs (including marijuana)? ☐ Yes ☒ No If yes, when was the last time?E. Have you ever been convicted for possession of, sale, or use of a narcotic drug, amphetamine, or a derivative thereof? ☐ Yes ☒ NoF. Have you ever been convicted of a criminal offense? In California, "crime" shall exclude convictions for marijuana-related offenses that are more than two years old, as defined in California Health and Safety Code sections 11357 (b) and (c) and 11360 (c), or in California Health and Safety Code sections 11364, 11365, or 11369 of the Health and Safety Code as they related to marijuana prior to January 1, 1976, or their statutory predecessors. ☐ Yes ☒ NoG. Do you currently have any criminal actions pending in which you are a defendant? (A "yes" answer will not necessarily disqualify you from employment.) ☐ Yes ☒ NoH. Are you currently on probation or parole status? (A "yes" answer will not necessarily disqualify you from employment.) ☐ Yes ☒ NoI. (40.25%) Have you tested positive, or refused a test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in the last three years? ☐ Yes ☒ No

If yes to any of the above questions, state circumstances and dates:

[REDACTED]

Which trucking school did you graduate from?

Truck driving school graduation date?

MILITARY STATUS

Have you served in the U.S. Armed Forces? ☐ Yes ☒ No Branch

Dates: From

To

Duties

A 101

Form 1

Revised 8/01/01

STC044132

REDACTED

EMPLOYMENT RECORD FOR PAST 10 YEARS

All applicants must list all full and part-time employment including military service, self employment, and periods of unemployment during preceding 10 years.
NOTE: List employers in reverse order starting with the most recent. Use an additional sheet if necessary.

From Mo Day Yr 10/08 To Mo Day Yr 04/09
Phone # 719-243-2231
Supervisor _____
Type of Equip. Driven _____

CURRENT OR MOST RECENT EMPLOYER

May We Call? Yes ___ No ___

Name L&H Drywall
Address P.O. BOX 468 Monument, CO 80132
Position Held Working Superintendent

Reason For Leaving No work

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? ☐ Yes ☒ No

SECOND PRIOR EMPLOYER

May We Call? Yes ___ No ___

Name Robinson Construction
Address 7470 Chirgton Rd. Colorado Springs, CO 80908
Position Held Working Superintendent

Reason For Leaving Not enough work

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? ☐ Yes ☒ No

THIRD PRIOR EMPLOYER

May We Call? Yes ___ No ___

Name Colorado Commercial Builders
Address 5410 Powers Center Point Colorado Springs, CO 80920
Position Held Working Superintendent

Reason For Leaving Laid off

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? ☐ Yes ☒ No

FOURTH PRIOR EMPLOYER

May We Call? Yes ___ No ___

Name Loewen Construction
Address Valley St Colorado Springs, CO 80920
Position Held Carpenter

Reason For Leaving Changed job for promotion

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☒ No
B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(b)? ☐ Yes ☒ No

FIFTH PRIOR EMPLOYER

May We Call? Yes ___ No ___

Name UNEMPLOYED
Address CO

From Mo Day Yr 02/08 To Mo Day Yr 08/08
Phone # 719-399-8183
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr 01/08 To Mo Day Yr 03/08
Phone # 719-243-2231
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr 08/08 To Mo Day Yr 02/08
Phone # 719-650-9287
Supervisor _____
Type of Equip. Driven _____

From Mo Day Yr 6/2000 To Mo Day Yr 11/09
Phone # _____
Supervisor _____

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Form 1

Revised 5/1/01

STC044133

REDACTED

Type of Equip. Driven _____

From Mo Day Yr 12/08 To Mo Day Yr 01/10
 Phone # 719-382-3000
 Supervisor _____
 Type of Equip. Driven _____

Position Held _____

Reason For Leaving

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☐ No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☐ No

SOUTH PHOEN EMPLOYER

May We Call? Yes _____ No _____

Name USTESAddress 18826 WIGWAN RDPUEBLO CO 81008Position Held STUDENTReason For Leaving GRAD

A. 391.21 (10) (iv) (b) Were you subject to the Federal Motor Carrier Safety Regulations (FMCSR's) while employed by this previous employer? ☐ Yes ☐ No

B. Was your job with this employer designated as safety sensitive function in any DOT regulated mode subject to alcohol and controlled substances testing as specified in FMCSR 391.21(B)? ☐ Yes ☐ No

USE SEPARATE SHEET FOR ADDITIONAL EMPLOYMENT HISTORY

REDACTED

DRIVING EXPERIENCE				
CLASS OF EQUIPMENT	TYPE OF EQUIPMENT VAN-TANK-FLAT-ETC.	DATES FROM TO		APPROX NO. OF MILES TOTAL
STRAIGHT TRUCK				0
TRACTOR AND SEMI TRAILER				0
TRACTOR AND TWO TRAILERS				0
OTHER				0

LICENSE LIST ALL DRIVERS LICENSES HELD IN PAST FIVE YEARS (NOTE: A COPY of your valid drivers license or CDL must be attached for your application to be processed)

STATE	EXPIRATION DATE	TYPE	ENDORSEMENTS
CO	6/24/2011	Operator	
FL			

MOVING TRAFFIC CONVICTIONS LIST FOR PAST FIVE (5) YEARS. IF NONE WRITE NONE.

DATE	LOCATION (STATE)	CHARGE	PENALTY
11/15/2008	Florida	Speeding	Traffic Stop

ACCIDENT RECORD IF NONE WRITE NONE.
LIST ALL INVOLVEMENT WITH TRUCK AND CAR INCLUDING PROPERTY DAMAGE FOR PAST FIVE YEARS INCLUDING PREVENTABLE AND NON-PREVENTABLE

DATE	TYPE VEHICLE	NATURE OF ACCIDENT (HEAD ON, REAR END, U-TURN, ETC.)	INDICATE PREVENTABLE OR NON-PREVENTABLE	FATALITIES	INJURIES	AMOUNT OF PROPERTY DAMAGE

STATES IN WHICH YOU HAVE OPERATED A CLASS-A MOTOR VEHICLE IN THE PAST FIVE YEARS

LIST ALL STATES:

REFERENCES (Please list 2 people able to verify your employment and personal history. Such as co-worker, neighbor, customer or an upstanding citizen of your community)

1. Name	KEN Y	Relationship	FRIEND	Phone #	
2. Name	MKE S	Relationship	FRIEND	Phone #	

ACKNOWLEDGEMENT

I, [Name], [Address], [City], [State], [Zip] (the Company) the right to investigate all references and to secure additional information about me, if job related. I release from liability the Company and its representatives for any use of this information and all other persons, corporations or organizations for furnishing such information. A copy of this page serves as my authorization to provide this information. I agree to sign all documents and consent forms which the Company deems necessary to verify the facts provided in this application. I give my consent and release from liability the Company and its representatives to respond to any inquiries made about me as part of a reference check by any subsequent or potential employer.

From time to time the company may find it necessary to conduct investigations. If it does, employees are expected to fully participate and cooperate in such investigations, including submission to searches of property. Failure to do so may subject employees to disciplinary action, which may include termination of employment.

I realize as a condition of employment I will be required to undergo a post-employment medical examination and physical abuse screening test at the expense of and as prescribed by the Company, and that any offer of employment is conditioned upon the successful completion of these tests. I agree to furnish such additional information and undergo any other examinations or tests to complete the employment file, or to continue my employment with the Company, if employed. These tests may include, but are not necessarily limited to, random, for cause, reasonable suspicion or post-accident alcohol and substance abuse screening tests. Further, I release the Company, its agents or employees from any and all claims or actions arising out of such alcohol and substance abuse testing, including, but not limited to, the testing procedures, the analysis or the disclosure of test results.

I understand that any offer of employment is contingent upon my ability to produce documentation verifying my identity and legal authorization to be employed, as required by the Immigration Reform and Control Act of 1986 (IRCA).

This application is active for only (60) days from the date it is completed, or until the specific position opening for which it was submitted is closed, whichever is earlier. Subsequent to the foregoing, complete on period from which a new application to be considered for this or any other position.

I understand and agree that any information, inaccurate, misleading, incomplete or omitted information provided by me in this application will be sufficient cause for cancellation of this application and/or separation from the Company's service if employed. Further, I understand that just as I am free to resign at any time, for any reason, with or without just cause, the Company reserves the right to terminate my employment at any time, for any reason, with or without just cause. I understand that the representative of the Company has the authority to make any verbal or written statement to the contrary. I recognize the employment relationship to be an at-will relationship and not for a specific period of time. This application represents the complete and final expression of the intent of the parties and may not be changed except by a writing duly executed by the undersigned and the President of the Company.

I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this or former application, if former agree, in the event that I am offered employment by the company, as a condition to that employment, all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, while

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FORM 1

Revised 8/24/07

STC644135

REDACTED

submitted to binding arbitration in lieu of any Federal or State investigative, administrative or legal proceeding. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

I have read carefully the above information, understand and accept the contents thereof. This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature _____

Date _____

R-101

Form 1

Revised 8/01/01

STC844138

REDACTED



14 10 10:29a

Whitney Electric

7192600517

p. 1

Attn: Patricia
From: Darrel R [REDACTED]
[REDACTED]

~~to~~

4 pgs including
cover-

Thank you
for your
help-

Please call if you have any
questions [REDACTED]
[REDACTED]

STC844137

REDACTED

Jan 14 10:29a Whitney Electric 7192800517 p.2
 OCIS Case Summary for CM-2001-5000- State of Oklahoma v. RUDINOV, DARRELL LEE

OCSN THE OKLAHOMA STATE COURTS NETWORK

Home Courts Court Dockets Legal Research Calendar Help
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IN THE DISTRICT COURT IN AND FOR TULSA COUNTY, OKLAHOMA

State of Oklahoma v. R. [REDACTED] DARRELL LEE	No. [REDACTED] (Criminal Misdemeanor)
	Filed: 10/04/2001 Closed: 04/16/2004
	Judge: Traffic Court Judge (General)

Parties

R. [REDACTED] DARRELL LEE, Defendant
 STATE OF OKLAHOMA, Plaintiff
 TULSA POLICE DEPARTMENT, ARRESTING AGENCY

Attorneys

Attorney
 C. [REDACTED] Ben D. (Bar # [REDACTED])

Represented Parties
 R. [REDACTED] DARRELL LEE

Events

Event	Party	Docket	Reporter
Tuesday, February 10, 2004 at 9:30 AM ARRAIGNMENT (ARR)	R. [REDACTED] DARRELL LEE	Arraignment Docket	
Friday, March 12, 2004 at 9:00 AM JURY TRIAL SOUNDING DOCKET (JTS)	R. [REDACTED] DARRELL LEE	Traffic Court Judge (General)	
Friday, April 16, 2004 at 9:01 AM JURY TRIAL SOUNDING DOCKET (JTS)	R. [REDACTED] DARRELL LEE	Traffic Court Judge (General)	

Counts

Parties appear only under the counts with which they were charged. For complete sentence information, see the court minute on the docket.

Count # 1. Count as Filed: ABDOM, DOMESTIC ASSAULT AND BATTERY IN PRESENCE OF A MINOR CHILD, in violation of 21 O.S. 644.C
 Date Of Offense: 09/24/2001

Party Name: [REDACTED] DARRELL LEE Disposition Information:
 Disposed: DISMISSED, 04/16/2004, Dismissed- Request of the State,
 Count as Disposed: DOMESTIC ASSAULT AND BATTERY IN PRESENCE OF A MINOR CHILD (ABDOM)
 Violation of 21 O.S. 644.C

Count # 2. Count as Filed: MALINJ, MALICIOUS INJURY TO PROPERTY, in violation of 21 O.S. 1751-1790
 Date Of Offense: 09/24/2001

<http://www.oscn.net/applications/ocisweb/GetCaseInformation.asp?submitted=true&viewt...> 1/14/2010

REDACTED

STC644138

Jan 14 10 10:29a Whitney Electric 7192600517 p.3
 OCTS Case Summary for CM-2001-5000- State of Oklahoma v. R [REDACTED] DARRELL... Page 2 of 3

Party Name:Disposition Information:

R [REDACTED]
 DARRELL LEE

Disposed: DISMISSED, 04/10/2004. Dismissed- Request of the State.
 Count as Disposed: MALICIOUS INJURY TO PROPERTY (MALINJ)
 Violation of [REDACTED]

Docket

Date	Code	Count	Party	Serial #	Entry Date	
10-04-2001	TEXT	1	R [REDACTED] DARRELL LEE	[REDACTED]	Oct 4 2001 4:46:54:380PM	\$ 0.00
CRIMINAL MISDEMEANOR INITIAL FILING.						
10-04-2001	INFORMATION	1	R [REDACTED] DARRELL LEE	[REDACTED]	Oct 5 2001 8:50:42:483AM	\$ 0.00
DEFENDANT DARRELL LEE R [REDACTED] WAS CHARGED WITH COUNT #1, DOMESTIC ASSAULT AND BATTERY IN PRESENCE OF A MINOR CHILD IN VIOLATION OF 21 O.S. 644 C						
10-04-2001	WAS		R [REDACTED] DARRELL LEE	[REDACTED]	Oct 5 2001 2:18:14:063AM	Unrealized \$ 30.00
WARRANT OF ARREST ISSUED \$8,000 CT1: \$5,000 CT2: JUDGE DTEY(\$ 30.00)						
10-04-2001	INFORMATION	2	R [REDACTED] DARRELL LEE	[REDACTED]	Jan 14 2001 8:39:00:563AM	\$ 0.00
DEFENDANT DARRELL LEE R [REDACTED] WAS CHARGED WITH COUNT #2, MALICIOUS INJURY TO PROPERTY IN VIOLATION OF 21 O.S. 1751-1790						
10-04-2001	TEXT		[REDACTED]	[REDACTED]	Oct 4 2001 4:46:55:627PM	\$ 0.00
OCS HAS AUTOMATICALLY ASSIGNED JUDGE TRAFFIC COURT JUDGE (GENERAL) TO THIS CASE.						
11-08-2001	AFD		R [REDACTED] DARRELL LEE	[REDACTED]	Nov 8 2001 8:24:54:070AM	\$ 0.00
AFFIDAVIT						
01-22-2004	BO	1	R [REDACTED] DARRELL LEE	[REDACTED]	Jan 22 2004 10:35:58:377AM	Realized \$ 10.00
PROFESSIONAL BOND FOR R [REDACTED] DARRELL LEE POSTED BY B [REDACTED] MICHAEL (PROFESSIONAL M [REDACTED] PEGGY) (POWER NUMBER: [REDACTED]). COUNT NUMBER 1, IN THE AMOUNT OF \$8,000.00, POSTED 01/22/2004(\$ 10.00)						
01-22-2004	BO	2	R [REDACTED] DARRELL LEE	[REDACTED]	Jan 22 2004 10:35:14:840AM	Realized \$ 10.00
PROFESSIONAL BOND FOR R [REDACTED] DARRELL LEE POSTED BY B [REDACTED] MICHAEL (PROFESSIONAL M [REDACTED] PEGGY) (POWER NUMBER: 10-18118). COUNT NUMBER 2, IN THE AMOUNT OF \$5,000.00, POSTED 01/22/2004(\$ 10.00)						
01-28-2004	RETRL		R [REDACTED] DARRELL LEE	[REDACTED]	Jan 28 2004 9:07:34:287AM	\$ 0.00
RETURN RELEASE						
01-28-2004	RETRW		R [REDACTED] DARRELL LEE	[REDACTED]	Jan 28 2004 9:07:34:287AM	\$ 0.00
RETURN WARRANT OF ARREST						
02-10-2004	CTARRJTS		R [REDACTED] DARRELL LEE	[REDACTED]	Feb 11 2004 11:42:26:743AM	\$ 0.00

<http://www.oscn.net/applications/ocisweb/GetCaseInformation.asp?submitted=true&view=...> 1/14/2010

[REDACTED] STC644139

REDACTED

Jan 14 10:29a Whitney Electric 7192600517 P.4
 UCIS Case Summary for CM-2001-2000- State of Oklahoma v. R. [REDACTED]

B. [REDACTED] MARK: DEFENDANT PRESENT, NOT IN CUSTODY AND REPRESENTED BY BEN C. [REDACTED] ARRAIGNMENT HELD. DEFENDANT WAIVES READING OF THE INFORMATION AND FURTHER TIME TO PLEAD. DEFENDANT ENTERS A PLEA OF NOT GUILTY. JURY TRIAL SOUNDING DOCKET SET FOR 3/12/04 AT 9:00 AM IN ROOM 124. BOND SET IN THE AMOUNT OF \$8,000 (DOM A&B PRES MINOR). \$5,000 (MAL INJ PROP); DEFENDANT RECOGNIZED BACK.

03-12-2004 CTPASS R. [REDACTED] Mar 12 2004 \$ 0.00
 DARRELL LEE [REDACTED] 11:21:02:710AM

B. [REDACTED] MARK: DEFENDANT PRESENT, NOT IN CUSTODY AND REPRESENTED BY BEN C. [REDACTED] STATE REPRESENTED BY GRANT FITZ. JURY TRIAL SOUNDING PASSED TO 4/16/04 AT 9:00AM, ROOM 124. BOND TO REMAIN; DEFENDANT RECOGNIZED BACK.

03-25-2004 RTSUB\$ R. [REDACTED] Mar 26 2004 Realized \$ 30.00
 DARRELL LEE [REDACTED] 9:26:10:841AM

RETURN SUBPOENA NOT SERVED CHARLYNE C. [REDACTED] NO SUCH PERSON AT ADDRESS (S 30.00)

04-16-2004 DISMISSED 1 R. [REDACTED] Apr 20 2004 \$ 0.00
 DARRELL LEE [REDACTED] 9:20:15:970AM

DARLENE C. [REDACTED] DEFENDANT PRESENT REPRESENTED BY BEN C. [REDACTED] STATE REPRESENTED BY GRANT FITZ. CASE CALLED. CASE DISMISSED COST TO STATE UNABLE TO LOCATE VICTIM. BOND EXONERATED

04-16-2004 BDNON 1 R. [REDACTED] Oct 10 2007 \$ 0.00
 DARRELL LEE [REDACTED] 1:27:31:437PM

THE STATUS OF THE BOND ENTRY DETAILED IN DOCKET SERIAL [REDACTED] ABOVE HAS CHANGED TO READ AS FOLLOWS:
 PROFESSIONAL BOND FOR R. [REDACTED] DARRELL LEE POSTED BY B. [REDACTED] MICHAEL (PROFESSIONAL:M. [REDACTED] PEGGY) (POWER NUMBER: [REDACTED], COUNT NUMBER 1, IN THE AMOUNT OF \$8,000.00, POSTED 01/22/2004, EXONERATED 04/16/2004.

04-16-2004 BDNON 2 R. [REDACTED] Oct 10 2007 \$ 0.00
 DARRELL LEE [REDACTED] 1:27:31:407PM

THE STATUS OF THE BOND ENTRY DETAILED IN DOCKET SERIAL [REDACTED] ABOVE HAS CHANGED TO READ AS FOLLOWS:
 PROFESSIONAL BOND FOR R. [REDACTED] DARRELL LEE POSTED BY B. [REDACTED] MICHAEL (PROFESSIONAL:M. [REDACTED] PEGGY) (POWER NUMBER:10-18118), COUNT NUMBER 2, IN THE AMOUNT OF \$5,000.00, POSTED 01/22/2004, EXONERATED 04/16/2004

01-14-2010 CTFREE R. [REDACTED] Jan 14 2010 \$ 0.00
 DARRELL LEE [REDACTED] 9:39:57:243AM

AMENDED TO REFLECT COUNT ONE AND TWO DISMISSED COST TO STATE
 DARLENE C. [REDACTED] DEFENDANT PRESENT REPRESENTED BY BEN C. [REDACTED] STATE REPRESENTED BY GRANT FITZ. CASE CALLED. CASE DISMISSED COST TO STATE. UNABLE TO LOCATE VICTIM. BOND EXONERATED

Report Generated by The Oklahoma Court Information System at January 14, 2010 10:12 AM

End of Transmission

<http://www.oscn.net/applications/ocisweb/GetCaseInformation.asp?submitted=true&viewt...> 1/14/2010

STC644140

REDACTED

STC844141

REDACTED

Documents	
1	20/20 held
2	lak
3	
4	
5	
6	

finer paid for not appearing

courts and they had not updated their

[REDACTED]

STC644142

REDACTED